



Attorney/Docket No. 31567.3
Customer No. 27683

1772
#8
03/27/03

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
Kramer, et al.

Serial No. 10/017,798

Filed: December 12, 2001

For: ePTFE PRODUCT FOR MEDICAL
APPLICATIONS

§
§ Group Art Unit: 1772
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§ Examiner: Unknown
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SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Commissioner For Patents
Washington, D.C. 20231

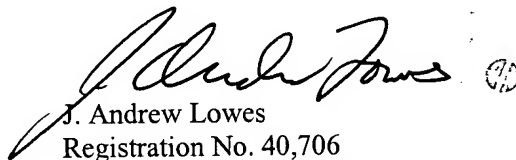
In compliance with the duty of disclosure under 37 CFR §1.56, and in accordance with the practice under 37 CFR §1.97 and §1.98, the Examiner's attention is directed to the documents listed on the enclosed modified Form PTO-1449. No inference should be made that the cited references are in fact material, are in fact prior art, or that no better art exists. The cited patents are listed in numerical order and are not in any order based on their pertinence. Copies of the listed information are attached.

This Information Disclosure Statement is being filed within three months of the United States filing date or before the mailing date of a first Office Action on the merits. No certification or fee is required (37 CFR §1.97(b)).

The Commissioner is hereby authorized to charge any additional fees which may be required or credit any overpayment to Deposit Account 08-1394.

It is respectfully requested that the above information be considered by the Examiner and that a copy of the enclosed Form PTO-1449 be returned indicating that such information has been considered.

Respectfully submitted,


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|--|---|---|---|------------------------|-------------------|
| In place of PTO 1449 Form | | U. S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE | | Complete if Known | |
| INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i> | | | | Application Number | 10/017,798 |
| | | | | Filing Date | December 12, 2001 |
| | | | | Applicant(s) | Kramer, et al. |
| | | | | Art Unit | 1772 |
| | | | | Examiner Name | Unknown |
| | | | | Attorney Docket Number | 31567.3 |
| SHEET | 1 | OF | 1 | | |

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| | | | |
|--------------------|--|-----------------|--|
| Examiner Signature | | Date Considered | |
|--------------------|--|-----------------|--|

Signature _____

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include a copy of this form with next communication to applicant.